

<i>SERFF Tracking Number:</i>	<i>UTAC-125853660</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Continental General Insurance Company</i>	<i>State Tracking Number:</i>	<i>40550</i>
<i>Company Tracking Number:</i>	<i>AR - CGI 09 MS STD RATE</i>		
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
	<i>Standard Plans</i>		
<i>Product Name:</i>	<i>2009 CGI MS Standard</i>		
<i>Project Name/Number:</i>	<i>2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE</i>		

Filing at a Glance

Company: Continental General Insurance Company

Product Name: 2009 CGI MS Standard SERFF Tr Num: UTAC-125853660 State: ArkansasLH

TOI: MS051 Individual Medicare Supplement - SERFF Status: Closed State Tr Num: 40550
Standard Plans

Sub-TOI: MS051.001 Plan A Co Tr Num: AR - CGI 09 MS STD State Status: Approved-Closed
RATE

Filing Type: Rate Co Status: Reviewer(s): Stephanie Fowler
Author: Sive Kode Disposition Date: 12/10/2008
Date Submitted: 10/15/2008 Disposition Status: Approved

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: 2009 CGI MS Standard Rate Filing
Project Number: AR - CGI 09 MS STD RATE
Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Pending
Date Approved in Domicile: 09/25/2007
Domicile Status Comments: Domicile state is
Nebraska. Last rate approval was on 9/25/07
Market Type: Individual
Group Market Size:
Group Market Type:

Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact: 8.6%
Filing Status Changed: 12/10/2008
State Status Changed: 12/10/2008
Corresponding Filing Tracking Number:
Filing Description:

Deemer Date:

Continental General Insurance Company 2009 Individual Standardized Medicare Supplement Rate Filing and Annual Rate Certification.

SERFF Tracking Number: UTAC-125853660 State: Arkansas

Filing Company: Continental General Insurance Company State Tracking Number: 40550

Company Tracking Number: AR - CGI 09 MS STD RATE

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans

Product Name: 2009 CGI MS Standard

Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

Company and Contact

Filing Contact Information

Sive Kode, Actuarial Technician skode@gafri.com
11200 Lakeline Boulevard #100 (800) 880-8824 [Phone]
Austin, TX 78717

Filing Company Information

Continental General Insurance Company	CoCode: 71404	State of Domicile: Nebraska
11200 Lakeline Blvd., Suite 100	Group Code: 84	Company Type: Life & Health
P. O. Box 26580		
Austin, TX 78755-0580	Group Name:	State ID Number:
(800) 880-8824 ext. [Phone]	FEIN Number: 47-0463747	

Filing Fees

Fee Required? Yes

Fee Amount: \$750.00

Retaliatory? No

Fee Explanation: \$50 x 15 plans

Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Continental General Insurance Company	\$750.00	10/15/2008	23197332

SERFF Tracking Number:	UTAC-125853660	State:	Arkansas
Filing Company:	Continental General Insurance Company	State Tracking Number:	40550
Company Tracking Number:	AR - CGI 09 MS STD RATE		
TOI:	MS051 Individual Medicare Supplement - Standard Plans	Sub-TOI:	MS051.001 Plan A
Product Name:	2009 CGI MS Standard		
Project Name/Number:	2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Stephanie Fowler	12/10/2008	12/10/2008

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	12/03/2008	12/03/2008	Sive Kode	12/05/2008	12/05/2008
Pending Industry Response	Stephanie Fowler	11/17/2008	11/17/2008	Sive Kode	12/03/2008	12/03/2008

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Revised Current & Proposed Rates	Rate	Sive Kode	12/08/2008	12/08/2008
Nationwide Projections by Plan	Supporting Document	Sive Kode	10/16/2008	10/16/2008

<i>SERFF Tracking Number:</i>	<i>UTAC-125853660</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Continental General Insurance Company</i>	<i>State Tracking Number:</i>	<i>40550</i>
<i>Company Tracking Number:</i>	<i>AR - CGI 09 MS STD RATE</i>		
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
	<i>Standard Plans</i>		
<i>Product Name:</i>	<i>2009 CGI MS Standard</i>		
<i>Project Name/Number:</i>	<i>2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE</i>		

Disposition

Disposition Date: 12/10/2008

Implementation Date:

Status: Approved

Comment: We have approved the requested rate increases for Plans A - J and Select Plans B, C, D, F, and G. This approval is subject to the following:

Increases will not be given more frequently than once in a twelve-month period.

Rate data does NOT apply to filing.

SERFF Tracking Number: UTAC-125853660 State: Arkansas

Filing Company: Continental General Insurance Company State Tracking Number: 40550

Company Tracking Number: AR - CGI 09 MS STD RATE

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans

Product Name: 2009 CGI MS Standard

Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

Item Type	Item Name	Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved	No
Supporting Document	Nationwide Projections by Plan	Approved	No
Rate (revised)	Current & Proposed Rates	Approved	Yes
Rate	Current & Proposed Rates		Yes
Rate	Monthly Current/Proposed Rates	Approved	Yes
Rate	Revised Current & Proposed Rates	Approved	Yes

SERFF Tracking Number: UTAC-125853660 *State:* Arkansas
Filing Company: Continental General Insurance Company *State Tracking Number:* 40550
Company Tracking Number: AR - CGI 09 MS STD RATE
TOI: MS051 Individual Medicare Supplement - *Sub-TOI:* MS051.001 Plan A
Standard Plans
Product Name: 2009 CGI MS Standard
Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 12/03/2008
Submitted Date 12/03/2008
Respond By Date 01/05/2009
Dear Sive Kode,

This will acknowledge receipt of the captioned filing.

Thank you for your response and corrected rate sheets. If you could please attach copies of the proposed rates broken down to the monthly amount I will be able to complete my review.

Please feel free to contact me if you have questions.

Sincerely,
Stephanie Fowler

Response Letter

Response Letter Status Submitted to State
Response Letter Date 12/05/2008
Submitted Date 12/05/2008

Dear Stephanie Fowler,

Comments:

Response 1

Comments: Current and proposed monthly rates are attached.

Please let me know if you have any other question.

Changed Items:

No Supporting Documents changed.

SERFF Tracking Number: UTAC-125853660 State: Arkansas
Filing Company: Continental General Insurance Company State Tracking Number: 40550
Company Tracking Number: AR - CGI 09 MS STD RATE
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: 2009 CGI MS Standard
Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Document Name:	Affected Form Numbers:	Rate Action:	Rate Action Information:	Attach Document:
Monthly	340, et al	New	Previous State Filing Number	
Current/Proposed				
Rates			Percent Rate Change Request	
			0	

Sincerely,
Sive Kode

SERFF Tracking Number: UTAC-125853660 *State:* Arkansas
Filing Company: Continental General Insurance Company *State Tracking Number:* 40550
Company Tracking Number: AR - CGI 09 MS STD RATE
TOI: MS051 Individual Medicare Supplement - *Sub-TOI:* MS051.001 Plan A
Standard Plans
Product Name: 2009 CGI MS Standard
Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 11/17/2008
Submitted Date 11/17/2008
Respond By Date 12/17/2008
Dear Sive Kode,

This will acknowledge receipt of the captioned filing.

Objection 1

- Current & Proposed Rates (Rate)

Comment: AR Rule and Regulation 27 s 6(C) states "No Medicare supplement policy or certificate may include a policy fee or any other similar charge. Applicants cannot be required to pay any fee other than the approved premium".

Please revise this filing to comply.

Please feel free to contact me if you have questions.

Sincerely,
Stephanie Fowler

Response Letter

Response Letter Status Submitted to State
Response Letter Date 12/03/2008
Submitted Date 12/03/2008

Dear Stephanie Fowler,

Comments:

Response 1

Comments: We have eliminated additional \$25.00 policy fee that would be added to the initial premium. Attached are revised rate charts without the note at the bottom about the \$25.00 fee.

Please let me know if you have any other question.

SERFF Tracking Number: UTAC-125853660 State: Arkansas
Filing Company: Continental General Insurance Company State Tracking Number: 40550
Company Tracking Number: AR - CGI 09 MS STD RATE
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: 2009 CGI MS Standard
Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

Related Objection 1

Applies To:

- Current & Proposed Rates (Rate)

Comment:

AR Rule and Regulation 27 s 6(C) states "No Medicare supplement policy or certificate may include a policy fee or any other similar charge. Applicants cannot be required to pay any fee other than the approved premium".

Please revise this filing to comply.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Document Name:	Affected Form Numbers:	Rate Action:	Rate Action Information:	Attach Document:
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Current &	340, et al	New	Previous State Filing Number	
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Proposed Rates

Percent Rate Change Request

0

Previous Version

Current &	340, et al	New	Previous State Filing Number	
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Proposed Rates

Percent Rate Change Request

0

Sincerely,
Sive Kode

SERFF Tracking Number: UTAC-125853660 State: Arkansas

Filing Company: Continental General Insurance Company State Tracking Number: 40550

Company Tracking Number: AR - CGI 09 MS STD RATE

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans

Product Name: 2009 CGI MS Standard

Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

Amendment Letter

Amendment Date:

Submitted Date: 12/08/2008

Comments:

Modal factors in the revised Exhibit 4 submitted on 12/5/08 were incorrect. Attached is revised rate chart with correct modal factors.

Please let me know if you have any questions.

Changed Items:

Rate/Rule Schedule Item Changes:

Document Name:	Affected Form Numbers: (Comma Separated list)	Rate Action:	Rate Action Information:	Attach Document:
Revised Current & Proposed Rates Exhibit 4 - Monthly Current and Proposed Rates.pdf	340, et al	New		Exhibit 4 - Monthly Current and Proposed Rates.pdf

Amendment Letter

Supporting Document Schedule Item Changes:

Exhibit 2e - NW Projections by Plan.pdf

<i>SERFF Tracking Number:</i>	<i>UTAC-125853660</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Continental General Insurance Company</i>	<i>State Tracking Number:</i>	<i>40550</i>
<i>Company Tracking Number:</i>	<i>AR - CGI 09 MS STD RATE</i>		
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
	<i>Standard Plans</i>		
<i>Product Name:</i>	<i>2009 CGI MS Standard</i>		
<i>Project Name/Number:</i>	<i>2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: UTAC-125853660 State: Arkansas

Filing Company: Continental General Insurance Company State Tracking Number: 40550

Company Tracking Number: AR - CGI 09 MS STD RATE

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans

Product Name: 2009 CGI MS Standard

Project Name/Number: 2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE

Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action: Action:*	Rate Action Information:	Attachments
Approved	Current & Proposed Rates	340, et al	New		Exhibit 4 - Current and Proposed Rates - Revised.pdf
Approved	Monthly Current/Proposed Rates	340, et al	New		Exhibit 4 - Monthly Current and Proposed Rates.pdf
Approved	Revised Current & Proposed Rates	340, et al	New		Exhibit 4 - Monthly Current and Proposed Rates.pdf

Continental General Insurance Company

Rate Chart

Form 340

Medicare Supplement Plan A

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,598.00	3,885.84	3,598.00	3,885.84

Modal Factors:

0.5200	Semi-Annual
0.2650	Quarter
0.0900	Monthly Direct
0.0850	Monthly Bank Draft

Area Factors:

1	1.000	720-723
2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 341

Medicare Supplement Plan B

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,887.00	4,197.96	3,887.00	4,197.96

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 342

Medicare Supplement Plan C

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	4,515.00	4,876.20	4,515.00	4,876.20

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 343

Medicare Supplement Plan D

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,430.00	2,624.40	2,430.00	2,624.40

Modal Factors:

0.5200	Semi-Annual
0.2650	Quarter
0.0900	Monthly Direct
0.0850	Monthly Bank Draft

Area Factors:

1	1.000	720-723
2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 344

Medicare Supplement Plan E

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,463.00	2,930.97	2,463.00	2,930.97

Modal Factors:

0.5200	Semi-Annual
0.2650	Quarter
0.0900	Monthly Direct
0.0850	Monthly Bank Draft

Area Factors:

1	1.000	720-723
2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 345

Medicare Supplement Plan F

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,468.00	2,665.44	2,468.00	2,665.44

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 346

Medicare Supplement Plan G

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,278.00	2,460.24	2,278.00	2,460.24

Modal Factors:

0.5200	Semi-Annual
0.2650	Quarter
0.0900	Monthly Direct
0.0850	Monthly Bank Draft

Area Factors:

1	1.000	720-723
2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 3DL

Medicare Supplement Plan H

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	1,823.00	2,278.75	1,823.00	2,278.75

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 348

Medicare Supplement Plan I with Prescription Drug Coverage

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	9,070.00	11,337.50	9,070.00	11,337.50

Modal Factors:	0.5200	Semi-Annual
	0.2650	Quarter
	0.0900	Monthly Direct
	0.0850	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 348 with Rider EC-352
Medicare Supplement Plan I without Prescription Drug Coverage
Issue Age Annual Premiums
Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	7,111.00	8,888.75	7,111.00	8,888.75

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S1

Medicare Supplement Select Plan B

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,323.00	3,588.84	3,323.00	3,588.84

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S2

Medicare Supplement Select Plan C

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,695.00	3,990.60	3,695.00	3,990.60

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S3

Medicare Supplement Select Plan D

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,078.00	2,244.24	2,078.00	2,244.24

Modal Factors:	0.5200	Semi-Annual
	0.2650	Quarter
	0.0900	Monthly Direct
	0.0850	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 3S5

Medicare Supplement Select Plan F

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,109.00	2,277.72	2,109.00	2,277.72

Modal Factors:	0.5200	Semi-Annual
	0.2650	Quarter
	0.0900	Monthly Direct
	0.0850	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 3S6

Medicare Supplement Select Plan G

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	1,856.00	2,004.48	1,856.00	2,004.48

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 340

Medicare Supplement Plan A

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	323.82	349.73	323.82	349.73

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 341

Medicare Supplement Plan B

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	349.83	377.82	349.83	377.82

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 342

Medicare Supplement Plan C

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	406.35	438.86	406.35	438.86

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 343

Medicare Supplement Plan D

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	218.70	236.20	218.70	236.20

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 344

Medicare Supplement Plan E

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	221.67	263.79	221.67	263.79

Modal Factors:

11.1111	Annual
0.5200	Semi-Annual
0.2650	Quarter
0.0850	Monthly Bank Draft

Area Factors:

1	1.000	720-723
2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 345

Medicare Supplement Plan F

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	222.12	239.89	222.12	239.89

Modal Factors:	11.1111	Annual
	0.5200	Semi-Annual
	0.2650	Quarter
	0.0850	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 346

Medicare Supplement Plan G

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	205.02	221.42	205.02	221.42

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3DL

Medicare Supplement Plan H

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	164.07	205.09	164.07	205.09

Modal Factors:	11.1111	Annual
	0.5200	Semi-Annual
	0.2650	Quarter
	0.0850	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 348

Medicare Supplement Plan I with Prescription Drug Coverage

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	816.30	1,020.38	816.30	1,020.38

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 348 with Rider EC-352
Medicare Supplement Plan I without Prescription Drug Coverage
Issue Age Annual Premiums
Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	639.99	799.99	639.99	799.99

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S1

Medicare Supplement Select Plan B

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	299.07	323.00	299.07	323.00

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S2

Medicare Supplement Select Plan C

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	332.55	359.15	332.55	359.15

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S3

Medicare Supplement Select Plan D

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	187.02	201.98	187.02	201.98

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S5

Medicare Supplement Select Plan F

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	189.81	204.99	189.81	204.99

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S6

Medicare Supplement Select Plan G

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	167.04	180.40	167.04	180.40

Modal Factors: 11.1111 Annual
 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 340

Medicare Supplement Plan A

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	323.82	349.73	323.82	349.73

Modal Factors: 11.1111 Annual
 5.7778 Semi-Annual
 2.9444 Quarter
 0.9444 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 341

Medicare Supplement Plan B

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	349.83	377.82	349.83	377.82

Modal Factors:	11.1111	Annual
	5.7778	Semi-Annual
	2.9444	Quarter
	0.9444	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 342

Medicare Supplement Plan C

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	406.35	438.86	406.35	438.86

Modal Factors:	11.1111	Annual
	5.7778	Semi-Annual
	2.9444	Quarter
	0.9444	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 343

Medicare Supplement Plan D

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	218.70	236.20	218.70	236.20

Modal Factors: 11.1111 Annual
 5.7778 Semi-Annual
 2.9444 Quarter
 0.9444 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 344

Medicare Supplement Plan E

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	221.67	263.79	221.67	263.79

Modal Factors:	11.1111	Annual
	5.7778	Semi-Annual
	2.9444	Quarter
	0.9444	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 345

Medicare Supplement Plan F

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	222.12	239.89	222.12	239.89

Modal Factors:

11.1111	Annual
5.7778	Semi-Annual
2.9444	Quarter
0.9444	Monthly Bank Draft

Area Factors:

1	1.000	720-723
2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 346

Medicare Supplement Plan G

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	205.02	221.42	205.02	221.42

Modal Factors: 11.1111 Annual
 5.7778 Semi-Annual
 2.9444 Quarter
 0.9444 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3DL

Medicare Supplement Plan H

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	164.07	205.09	164.07	205.09

Modal Factors:	11.1111	Annual
	5.7778	Semi-Annual
	2.9444	Quarter
	0.9444	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 348

Medicare Supplement Plan I with Prescription Drug Coverage

Issue Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	816.30	1,020.38	816.30	1,020.38

Modal Factors:	11.1111	Annual
	5.7778	Semi-Annual
	2.9444	Quarter
	0.9444	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 348 with Rider EC-352
Medicare Supplement Plan I without Prescription Drug Coverage
Issue Age Annual Premiums
Arkansas Current & Proposed **Monthly Direct** Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	639.99	799.99	639.99	799.99

Modal Factors: 11.1111 Annual
 5.7778 Semi-Annual
 2.9444 Quarter
 0.9444 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S1

Medicare Supplement Select Plan B

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	299.07	323.00	299.07	323.00

Modal Factors: 11.1111 Annual
 5.7778 Semi-Annual
 2.9444 Quarter
 0.9444 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S2

Medicare Supplement Select Plan C

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	332.55	359.15	332.55	359.15

Modal Factors:	11.1111	Annual	11.7647
	5.7778	Semi-Annual	6.1176
	2.9444	Quarter	3.1176
	0.9444	Monthly Bank Draft	1.0000

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

Continental General Insurance Company

Rate Chart

Form 3S3

Medicare Supplement Select Plan D

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	187.02	201.98	187.02	201.98

Modal Factors: 11.1111 Annual
 5.7778 Semi-Annual
 2.9444 Quarter
 0.9444 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S5

Medicare Supplement Select Plan F

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	189.81	204.99	189.81	204.99

Modal Factors: 11.1111 Annual
 5.7778 Semi-Annual
 2.9444 Quarter
 0.9444 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Continental General Insurance Company

Rate Chart

Form 3S6

Medicare Supplement Select Plan G

Attained Age Annual Premiums

Arkansas Current & Proposed **Monthly Direct** Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	167.04	180.40	167.04	180.40

Modal Factors:	11.1111	Annual
	5.7778	Semi-Annual
	2.9444	Quarter
	0.9444	Monthly Bank Draft

Area Factors:	1	1.000	720-723
	2	0.900	ELSE

<i>SERFF Tracking Number:</i>	<i>UTAC-125853660</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Continental General Insurance Company</i>	<i>State Tracking Number:</i>	<i>40550</i>
<i>Company Tracking Number:</i>	<i>AR - CGI 09 MS STD RATE</i>		
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
	<i>Standard Plans</i>		
<i>Product Name:</i>	<i>2009 CGI MS Standard</i>		
<i>Project Name/Number:</i>	<i>2009 CGI MS Standard Rate Filing/AR - CGI 09 MS STD RATE</i>		

Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Rate and Rule	Current & Proposed Rates	10/13/2008	Exhibit 4 - Current and Proposed Rates.pdf

Continental General Insurance Company

Rate Chart

Form 340

Medicare Supplement Plan A

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,598.00	3,885.84	3,598.00	3,885.84

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 341

Medicare Supplement Plan B

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,887.00	4,197.96	3,887.00	4,197.96

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 342

Medicare Supplement Plan C

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	4,515.00	4,876.20	4,515.00	4,876.20

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 343

Medicare Supplement Plan D

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,430.00	2,624.40	2,430.00	2,624.40

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 344

Medicare Supplement Plan E

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,463.00	2,930.97	2,463.00	2,930.97

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 345

Medicare Supplement Plan F

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,468.00	2,665.44	2,468.00	2,665.44

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 346

Medicare Supplement Plan G

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,278.00	2,460.24	2,278.00	2,460.24

Modal Factors:

0.5200	Semi-Annual
0.2650	Quarter
0.0900	Monthly Direct
0.0850	Monthly Bank Draft

Area Factors:

1	1.000	720-723
2	0.900	ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 3DL

Medicare Supplement Plan H

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	1,823.00	2,278.75	1,823.00	2,278.75

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 348

Medicare Supplement Plan I with Prescription Drug Coverage

Issue Age Annual Premiums

Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	9,070.00	11,337.50	9,070.00	11,337.50

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 348 with Rider EC-352
Medicare Supplement Plan I without Prescription Drug Coverage
Issue Age Annual Premiums
Arkansas Current & Proposed Rates

Issue Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	7,111.00	8,888.75	7,111.00	8,888.75

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 3S1

Medicare Supplement Select Plan B

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,323.00	3,588.84	3,323.00	3,588.84

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 3S2

Medicare Supplement Select Plan C

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	3,695.00	3,990.60	3,695.00	3,990.60

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 3S3

Medicare Supplement Select Plan D

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,078.00	2,244.24	2,078.00	2,244.24

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 3S5

Medicare Supplement Select Plan F

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	2,109.00	2,277.72	2,109.00	2,277.72

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.

Continental General Insurance Company

Rate Chart

Form 3S6

Medicare Supplement Select Plan G

Attained Age Annual Premiums

Arkansas Current & Proposed Rates

Attained Age	MALE		FEMALE	
	Current	Proposed	Current	Proposed
65	1,856.00	2,004.48	1,856.00	2,004.48

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0900 Monthly Direct
 0.0850 Monthly Bank Draft

Area Factors: 1 1.000 720-723
 2 0.900 ELSE

Add an additional \$25.00 policy fee to the initial premium.